Darken in box for STAT order - >

STONY BROOK UNIVERSITY MEDICAL CENTER
Stony Brook, N.Y. 11794

* P H 2 C 0 2 6 *

PHYSICIAN'S ORDER SHEET CONTINUATION

UNIT

Date	Time	ORDERS: **Must** include physician's signature and ID# **STAT ORDERS MUST BE COMMUNICATED TO NURSE** **DO NOT USE PROHIBITED ABBREVIATIONS** **Never use: QD, qd, QOD, qod, ug, U, IU, Apothecary symbols, Apostrophe for time, BIW, TIW, decimal point without a leading zero, Trailing zero after whole number, MSO_4, MS, $MgSO_4$, any other drug abbreviations.**	Transcriber's Initials/ID#
			1/1
		Intrathecal CytARAbine Chemotherapy	
		Dx:	
		Allergies:	
		Ht: _____cm Wt: _____kg BSA: _____m2	
		Give CytARAbine 100mg intrathecal via Omaya reservoir x 1	
		on ___/____/___. QS to 8mL with preservative free normal saline	

USE BALL POINT PEN ONLY AND PRINT CLEARLY

PH2CO26 (11/06)

SCAN COPY TO PHARMACY AND PLACE IN MEDICAL RECORDS